

**The Commonwealth of Massachusetts**

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**ANNUAL REPORT**

OF THE

**TRUSTEES OF THE MASSACHUSETTS:  
HOSPITAL SCHOOL, *Canton (Crippled)***

AT CANTON

FOR THE

YEAR ENDING NOVEMBER 30, 1929

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DEPARTMENT OF PUBLIC WELFARE



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## The Commonwealth of Massachusetts

STATE HOUSE, BOSTON

### MASSACHUSETTS HOSPITAL SCHOOL

#### MASS. TRUSTEES

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ROBERT SOUTTER, M. D., Boston  
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ELEANOR DUNBAR, R.N., *Hospital Supervisor*.  
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JOHN SMITH, *Chief Engineer*.  
WALTER R. SPAULDING, *Carpenter Foreman*.  
JESS BLACK, *Farmer*.

\* On leave.

\*\* Substitute.

#### REPORT OF THE TRUSTEES

*To His Excellency the Governor and the Honorable Council:*

In presenting this report the Trustees of the Massachusetts Hospital School desire to mention in review some of the conditions under which the school was established and the principles governing its growth and development.

The original act of incorporation defines the institution as a school and home for the education and care of the crippled and deformed children of the Commonwealth. With no accurate census of cripples in the State it was impossible to determine the number needing special educational opportunities, or surgical and nursing care not already provided by existing institutions.

After some deliberation and a careful study of the problem it was decided that the school should be organized for the educational training of a comparatively large and deserving class of crippled children who might be directed away from dependency towards lives of usefulness.

Children whose mental intelligence was found to be hopelessly feeble were excluded from the first as not coming within the educational scope of the school. The same was true of the deaf, blind and epileptic. Applications for the admission of children destined to die within a short period were rejected, as were also acute cases needing only surgical relief.

During the first year the school was operated under this plan and classification, the trustees were convinced that under any other organization for

the nurture, care and training of crippled children the school would degenerate either into an institutional home for chronic cases or a cripples' hospital merely meeting the temporary needs of a physically dependent class. The trustees made an earnest endeavor to avoid both of these dangers. The first months of administration also brought out the fact that many parents were reluctant to apply to local boards of public welfare for assistance in obtaining the advantages the school had to offer. With experience as a guide the legislature of 1909 wisely enacted a law authorizing the admission and discharge of children subject to such rules and regulations as the trustees might prescribe, and furthermore under the same Act removed the stain of pauperization associated with public relief as applied to children in the school.

The problem was found to be a complex one, but the work of the school increased rapidly and it was found that there were in the Commonwealth many children who were becoming illiterate because of their physical inability to attend school and that such children under proper management could be educated to become useful and to a greater or less degree self-supporting.

As the number of pupils increased provision for hospital care became necessary for the special surgical care needed by crippled children and appropriate treatment of the diseases common to childhood.

An infirmary with operating room, laboratory and X-ray equipment and accommodations for twenty-six patients was completed in 1910. It was found to be adequate to the needs of the school population, but in 1920 the trustees were called upon to construct and administer a new infirmary for the care of sick minor wards of the Department of Public Welfare.

In accepting this added responsibility it was evident to all that the school and new hospital should be as completely separate organizations as was compatible with economic administration. The new infirmary was opened for the admission of patients on October 26, 1922, and with this increase in the hospital facilities of the institution it became necessary to provide accommodations for additional nurses and employees and the original school infirmary with its wards and rooms for patients was remodeled for the purpose.

In the fall of 1924 the trustees gave special consideration to the most practical way to prevent fire in the buildings which were not designed in fire-proof construction. The fire alarm system and fire hydrant protection were extended and a high power turbine pump installed. It also seemed a wise safeguard for a proportionately larger number of helpless children to abandon the second story of the industrial building which had been used as a dormitory for 44 boys. The industrial building was erected at a time when there was some uncertainty as to the future needs of the institution in the anticipation that it would be given up when experience proved the wisdom of a permanent construction for a more definite purpose.

Since the opening of the new infirmary 74 beds at the old infirmary and industrial building have been given up for reasons above mentioned and although the hospital facilities have increased, the capacity of the institution essentially is unchanged. The superintendent's report shows that 969 children were under treatment during the year just closed, as compared to 354 in the year immediately preceding the establishment of the new hospital unit.

The trustees are confronted with a new problem which demands early consideration. It has been found, as was anticipated, that many patients entered for hospital care pass through a period of convalescence when they are neither sick enough to be in bed nor quite well enough to be discharged. At the close of the year there were 72 patients in the hospital department of whom 42 were convalescing in sick wards for want of more appropriate accommodation. Reference was made in the report of 1922 to the probable need for two cottages, one for boys and one for girls, and the trustees now urgently recommend an appropriation for the erection of at least one thirty-bed cottage in fire-proof construction at an estimated cost of \$50,000.

The trustees have received several bequests from generous friends of the school which are being administered under the provisions of Chapter 306



of the Acts of 1922. It is hoped that the endowment fund already well established may be increased so that it will be possible for the trustees to render temporary assistance to deserving graduates of the school, who may be out of work or without home resources, to obtain a favorable start at self-support for which they have been trained.

Certain worthy and well qualified graduates having physical deformities will encounter difficulties in obtaining desirable occupation, especially if they are known to be recipients of public relief. If, however, the trustees can guarantee their character and training and advance a sum sufficient for such crippled persons to make a favorable start, one more hindrance to progress and accomplishment may be removed.

One loan of but \$5 enabled a badly crippled graduate to obtain a position of trust and responsibility which he has held for the past five years. Another graduate temporarily in need of assistance asked for and received a loan of \$200 which he returned with interest within the first year.

In reviewing a list of our 345 graduates, it is very striking to note that of our earlier classes, where the persons are now of an age to be established in life, practically every one now living is self-supporting. Many of the young men are married and are supporting families as well. Some graduates who have died were also prospering and on the way to a promising future. Of the twenty-two women graduates married, it is safe to say that the domestic training received at the school has been invaluable, though some still work outside the home. One, widowed and left with a little daughter, has an excellent and responsible position as bookkeeper. Of those graduates whose physical handicap has been too great to permit of entire self-support, or whose home conditions allow them to remain there, there is no doubt that in most cases their Hospital School training has much diminished the burden of their support, and in many cases it probably enables them to render an equivalent for their maintenance.

The survey now being made by the Department of Public Welfare will be of the greatest value in determining what changes if any should be made in the future policy of the school. Whatever improvement may come to the health of future children through better sanitation in the Commonwealth, it is certain that there will be demand for the educational and industrial training of a large number of deserving children, illiterate or improperly taught on account of physical disabilities, who can by proper care be made helpful to the community.

The report of the superintendent is annexed hereto and made a part of this report.

Respectfully submitted,

WALTER C. BAYLIES  
WILLIAM FITZGERALD  
ANDREW MARSHALL

GEORGE H. ELLIS  
ROBERT SOUTTER, M. D.  
*Trustees.*

## SUPERINTENDENT'S REPORT

*To the Trustees of the Massachusetts Hospital School:*

I hereby submit the following report for the year ending November 30, 1929.

Nine hundred and sixty-nine children have been under treatment during the year. The daily average number of crippled and deformed children enrolled for care and education was 246.06 and the daily average of sick minor wards was 37.24. There were in the institution on December 1, 1928, 199 school and 80 hospital cases, or a total of 279 children.

Six hundred and ninety children were admitted, of whom 10 were returned from visit of last year, 574 to the hospital and 106 to the school. There were remaining at the end of the year 228 crippled and deformed children and 44 sick minor wards.

The greatest number in both departments at any one time during the year was 325 on March 26, 1929.

The average age of all children admitted during the year was 9 years,

P. D. 82 5  
 2 months and 8 days, the youngest being 6 weeks and the oldest 20 years, 2 months and 17 days.

Exclusive of 25 whose birthplaces were unknown, 561, or 82½%, of the 680 children admitted were born in Massachusetts; 77, or 13%, were born in other parts of the United States, and 17, or 2½%, came from foreign countries. The nativity of 164 fathers and 108 mothers was unknown. Out of the remainder, 150, or 22%, of the fathers and 201, or 30%, of the mothers were born in Massachusetts; 192 fathers and mothers were born in other parts of the United States, and 285, or 42%, of the fathers and 260, or 31%, of the mothers were foreign born.

### HOME VISITS

More home visits have been made during the year than for any corresponding period. One hundred and sixteen children were absent during Christmas week, representing 1,126 days' absence. July 4th and Thanksgiving Day also brought the customary seasonal decrease in numbers. The daily average for the year was still further influenced by other holidays and there were more than the usual number of week-end visits. It has become the custom for some most devoted parents to call for their children regularly after the close of school on Friday afternoons to take them to nearby homes to remain until the opening of school on Monday mornings.

From an administrative point of view there would at first appear to be numerous objections to the practice of granting many unrestricted visits even to nearby homes not unfavorable to a child's health. Home visits cause a lower daily average number which appears to be inconsistent with the capacity of the institution; they involve statistics and complicate clerical records, increase the per capita cost of maintenance and introduce dangers to health, especially of the contagious diseases common to children. However, such difficulties are hard to explain understandingly to parents of children, who, although crippled in the activity of their limbs, otherwise are in good general health. And, after all, who will say that the aggregate of loss is greater than the gain in the comparative absence of homesickness and the advantage of parental co-operation. Experience has led to the belief that the arbitrary refusal of home visits is likely to hinder or obstruct the moral progress of the school and that every effort should be made to cultivate the principles and dispositions on which progress depends.

Very many graduates and former pupils return each year to pay their respects to the school with its happy associations for which there is gratifying evidence of an affectionate regard. At the beginning of the school year one graduate, after obtaining her degree from Leland Stanford University, crossed the continent to join our staff as head teacher. Her predecessor, also a graduate of the school and now a member of the faculty of a college in another state, never fails to pay us a brief visit whenever she returns to her Massachusetts home. After an absence of nine years, a young man traveled several hundred miles for a visit of but a few hours to report the progress he was making at self-support, directly as a result of the training given at the school. I might mention scores of similar evidence of loyalty and devotion. The Alumni Association continues to be a source of encouragement to the teachers and an inspiration to the undergraduates who, with few exceptions, show much enthusiasm for their work.

The social worker, who has found time from her regular duties to supervise the work of the teaching staff and to direct many closely related activities, makes the following report of the work of the

### SCHOOL.

Attendance data for the school year ending June, 1929, are as follows:

	Average Membership	Per Cent of Attendance
Grades 7-8 . . . . .	46	96
Grades 4-5-6 . . . . .	55	94.8
Grades 2-3 . . . . .	50	90.09
Sub primary-1 . . . . .	54	91



Two hundred and forty different pupils were enrolled for academic work, not including graduate pupils working at various forms of industrial training.

During the year every pupil has been given in the classroom one of the standard tests. For the primary groups the Detroit Kindergarten and First Grade Tests were used, and in the second through the eighth inclusive, the Stanford Achievement Tests. We have used these as the authors suggest, not with the idea that mentality can be measured, or for the purpose of making comparisons with other schools, but as a stimulus to effort on the part of the pupils and teachers both.

The interest and pleasure shown in working with these summaries of achievement have already warranted their continuance over a term of years. We hope that a record of school progress and improvement may be shown to be a valuable part of individual pupil histories. It may be noted in passing that the standing attained by the pupils in the achievement tests corresponds in most cases very closely with the marks heretofore given them by the judgment of their teachers. It is also interesting to observe that so many of our pupils who have had their entire school training with us compare favorably with those from the public schools, where a much longer time-schedule is in force.

The new schoolhouse continues to be an attractive social center. It makes a pleasant and most suitable place for the numerous parties which the different grades organize and enjoy. During the whole year the eighth grade, under the guidance of the head teacher, held regular teas on Thursday afternoons. A large number of guests have attended, both from the school and from elsewhere. This pleasant custom is being carried on by this year's class with much enthusiasm.

Graduation exercises were held as usual on the last Friday in June. Mr. Andrew Marshall of the Board of Trustees conferred diplomas on twenty-two graduates. A number of these boys and girls are carrying on their education in higher schools.

An interesting vocational experiment is this year taking place among those of our graduates who are for some reason obliged to stay at the school after completing the eighth grade. Our present head teacher is well fitted, in theory and in practical business experience, to teach commercial subjects. Under her direction, a small group of girls and one boy, have been doing daily work in shorthand and typewriting. All who have taken this work have merited it by the scholastic standing they kept up while in the grades. Their interest and attention to business gives hopeful indications for their future.

Trends seen in the community, as well as at school, would seem to be in the direction of bringing us an increasing number of pupils affected by infantile paralysis. This has always been an interesting group, most important for educational guidance and vocational training, because of the fact that their disability is permanent. Their mentality may be expected to vary as does that of other children. Whatever it is, it should be given opportunity for development to the limit. These children also should be furnished occasions to develop self-reliance and strength of will. Only those who have watched our successful graduates hampered by this disability, can know the daily and hourly courage demanded in the struggle to meet the world on equal terms. That so many have made the effort until they have established ease and wiped away the evidence of their mental combat has long been an inspiration to those who know them. That we should furnish an opportunity to others to gain in physical strength and the bravery to overcome unusual difficulty still continues one of our greatest opportunities and most pressing duties.

If education is to deserve the name, it must be adapted to the individual. We should make in the future an even greater effort than in the past, to study the capabilities of each child who comes to us, in order that we may give him a chance to progress scholastically without being hampered by the rate of others, and to grow in personal power by classroom work which shall call into use the qualities needed in after life.

## THE HOSPITAL

Every child received at the institution, whether an orthopedic case for the school department or a minor ward for hospital care only, is entered through the Bradford Infirmary.

On first admission a complete physical examination is made as a routine procedure, including X-ray, laboratory analyses, dental examination and other diagnostic measures. School cases usually are held at the infirmary until they have passed the incubation period of the common contagious diseases. During this period following the initial examination, the social worker, having previously seen the child at home, is helpful in making new adjustments pleasant; the dental hygienist takes up her duties with the child and the necessary braces, splints and orthopedic appliances are prescribed by the physicians for the work of the apparatus shop. Any surgical procedure for the correction of deformities usually is not begun until a child has become well established in school. When a surgical operation has been decided upon, or a child's illness demands special medical and nursing care, he may be and frequently is readmitted to the infirmary by transfer from the school department.

Patients received from the Division of Child Guardianship and properly not classifiable as crippled and deformed children remain at the infirmary until discharged. Both groups make heavy demands upon the hospital, 857 children having passed through that department during the year. In the nose and throat clinic alone there have been 365 operations. Altogether 408 operations have been performed under ether and of this number 17 were of major importance. Nine hundred and fifty X-rays have been taken.

In general the health of the entire population has been good throughout the year. One nurse and 10 children had chicken-pox. There were 8 cases of uncomplicated whooping cough. Dr. Kemp's son and one employee suffered from a sharp attack of mumps, but the early recognition of symptoms and prompt isolation prevented the development of other cases. During the year there were 5 deaths from the following causes: Chronic endocarditis and tuberculous disease of spine; bronchopneumonia and inanition; amyloid degeneration of kidneys and liver and osteomyelitis; chronic multiple osteomyelitis and amyloid degeneration of liver and kidneys; chronic endocarditis and arthritis.

Recently it has become the fashion to place much emphasis upon the value of ultra-violet light as a therapeutic measure in the treatment of orthopedic children. Our carefully tabulated observations in the use of the artificial light rays would be disappointing to some advocates of that method of treatment. Doubtless the wide difference between our results and those made by other observers may be explained by the healthful outdoor conditions under which our children live both day and night as compared to the shut-in environment of many slum stunted children attending other clinics. While we continue to prescribe the ultra violet light, as well as massage, muscle training and graduated exercises in certain selected cases, they have not been employed as a substitute for a child's natural instinct for play, which always has been an important factor in the life of the school.

## THE PHYSIOTHERAPIST'S

time during the past year has been about equally divided between individual attention to special cases and the supervision of group activities on the playgrounds. Nutritious food, play, when not carried to the point of fatigue, plenty of sleep, fresh air and sunlight have come to be regarded as indispensable.

## DIAGNOSIS ON ADMISSION

*School Department*

	Boys	Girls
Amputation of finger . . . . .	1	—
Arthritis, acute . . . . .	2	—
Arthritis, chronic . . . . .	2	—
Club foot . . . . .	—	2
Congenital amyotonia . . . . .	1	—
Congenital dislocation of hip . . . . .	—	5
Fracture of humerus . . . . .	—	1
Fracture of tibia . . . . .	—	1
Legg's disease . . . . .	2	—
Osteomyelitis . . . . .	2	2
Paralysis from cord injury . . . . .	1	—
Paralysis, brachial . . . . .	1	—
Paralysis, infantile . . . . .	17	13
Paralysis, obstetrical . . . . .	1	—
Paralysis, spastic . . . . .	6	6
Paralysis, post diphtheritic . . . . .	1	—
Progressive muscular dystrophy . . . . .	3	—
Rickets . . . . .	7	5
Scoliosis . . . . .	3	2
Scoliosis, congenital . . . . .	—	1
Spina bifida paralysis . . . . .	—	1
Tuberculous disease of hip . . . . .	5	2
Tuberculous disease of knee . . . . .	1	1
Tuberculous disease of spine . . . . .	6	—
Tuberculous disease of shoulder . . . . .	1	—
Undiagnosed . . . . .	1	—
	64	42

*Hospital Department*

Abscess, inguinal . . . . .	—	1
Abscesses, multiple . . . . .	2	—
Acidosis . . . . .	—	1
Adenitis, cervical . . . . .	—	1
Angina pectoris, pseudo . . . . .	—	3
Appendicitis . . . . .	1	5
Arthritis, acute . . . . .	5	2
Arthritis, gonorrheal . . . . .	—	1
Bartholinitis . . . . .	—	2
Blepharitis . . . . .	1	—
Bronchitis, acute . . . . .	1	—
Chorea . . . . .	—	1
Cholecystitis . . . . .	1	—
Cleft palate . . . . .	1	—
Cystitis . . . . .	—	1
Dental caries, multiple . . . . .	—	1
Diabetes mellitus . . . . .	1	—
Eczema . . . . .	—	1
Endocarditis . . . . .	1	1
Endocarditis, congenital . . . . .	1	—
Enuresis . . . . .	1	—
Epidermophytosis . . . . .	1	—
Epilepsy . . . . .	1	—
Gonorrhea . . . . .	1	13
Hernia, inguinal . . . . .	2	—
Hysteria . . . . .	—	1
Impetigo . . . . .	18	9
Impetigo; cervical adenitis . . . . .	1	—
Impetigo; congenital syphilis . . . . .	—	1



*Hospital Department—Continued*

	Boys	Girls
Impetigo; dental caries . . . . .	1	1
Impetigo; otitis media; cervical adenitis . . . . .	1	—
Impetigo; pediculosis . . . . .	2	3
Impetigo; pyorrhea . . . . .	1	—
Impetigo; scabies . . . . .	3	—
Malnutrition . . . . .	2	3
Mastoiditis . . . . .	2	—
Menorrhagia . . . . .	—	1
Mitral regurgitation . . . . .	1	1
Myalgia . . . . .	—	1
Osteomyelitis . . . . .	1	—
Otitis media . . . . .	2	1
Otitis media; adenitis . . . . .	1	—
Phimosis . . . . .	7	—
Phimosis; dental caries . . . . .	1	—
Rhustoxicodendron . . . . .	—	1
Scabies . . . . .	45	12
Scabies; axillary abscess . . . . .	1	—
Scabies; conjunctivitis . . . . .	—	1
Scabies; dental caries . . . . .	3	4
Scabies; furunculosis . . . . .	1	—
Scabies; impetigo . . . . .	6	1
Scabies; impetigo; dental caries . . . . .	1	—
Scabies; scoliosis . . . . .	2	—
Scabies; syphilis . . . . .	1	4
Scabies; urticaria . . . . .	1	1
Scabies; Vincent's angina . . . . .	—	1
Syphilis, congenital . . . . .	2	2
Tinea circinata . . . . .	2	—
Tonsils and adenoids, diseased . . . . .	130	155
Tonsils and adenoids, diseased; cervical adenitis . . . . .	—	1
Tonsils and adenoids, diseased; chorea . . . . .	1	—
Tonsils and adenoids, diseased; club foot . . . . .	1	1
Tonsils and adenoids, diseased; congenital syphilis . . . . .	—	1
Tonsils and adenoids, diseased; conjunctivitis . . . . .	1	—
Tonsils and adenoids, diseased; dental caries . . . . .	8	9
Tonsils and adenoids, diseased; eczema . . . . .	—	1
Tonsils and adenoids, diseased; enuresis . . . . .	—	1
Tonsils and adenoids, diseased; epilepsy . . . . .	—	1
Tonsils and adenoids, diseased; gonorrhea . . . . .	1	1
Tonsils and adenoids, diseased; hemorrhoids . . . . .	1	—
Tonsils and adenoids, diseased; harelip . . . . .	1	—
Tonsils and adenoids, diseased; impetigo . . . . .	5	1
Tonsils and adenoids, diseased; maxillary abscess . . . . .	—	1
Tonsils and adenoids, diseased; otitis media . . . . .	2	2
Tonsils and adenoids, diseased; phimosis . . . . .	4	—
Tonsils and adenoids, diseased; phimosis; dental caries . . . . .	1	—
Tonsils and adenoids, diseased; phimosis; scabies . . . . .	1	—
Tonsils and adenoids, diseased; scabies . . . . .	12	4
Tonsils and adenoids, diseased; scabies; dental caries; otitis media . . . . .	1	1
Tonsils and adenoids, diseased; urticaria; dental caries . . . . .	—	1
Tonsils and adenoids, diseased; undescended testicle . . . . .	1	—
Tonsils and adenoids, diseased; vaginitis . . . . .	—	3
Venereal warts . . . . .	—	1
Vaginitis . . . . .	—	4
Vaginitis; nephritis . . . . .	—	1
	301	273

## THE DENTIST

has been able to keep her work up to date with practically no exception to the rule that oral hygiene must be maintained at a high standard of excellence. Aside from treatment, prophylaxis and 233 extractions the record shows that 1,190 fillings have been done as follows: 467 amalgam, 160 cement, 115 cement and amalgam, 371 copper amalgam, 2 root canal, 37 synthetic, and 38 zinc oxide and eugenol.

Another important factor in the constructive foundation which we endeavor to arrange for our children has been introduced this year to supplement the work of the dentist.

In August Miss Thelma Ferguson was appointed as full-time dental hygienist and her services have been most acceptable. Her report will be of interest.

"Of 294 children of school age I have found that 206 have their permanent six year old molars. They are filled in most cases but it is very unusual for such a large percentage to have kept their first permanent molars at all. In all, 309 children have been examined and had a thorough prophylactic treatment, 15 of whom were under six years of age and 11 had perfect deciduous teeth. Through tooth brush drills it was found that only about one child in every fifteen brushed the inside of their teeth. This has been corrected and the children now brush the inside as well as the outside. The children have been taught the correct method of tooth brushing and from recent examination a marked improvement in mouth cleanliness has been observed.

"This is more so with the boys than with the girls. They have by far the cleaner teeth and have shown a greater interest in their teeth, a very unusual thing.

"An effort will be made to interest the girls by means of short plays and stories. The plays will be acted chiefly by the girls and will deal with the relation of the teeth to health and instruction in the proper foods to eat for strong teeth."

Work in the hospital has increased threefold while the capacity of the institution has remained essentially unchanged.

Reference having been made to some of the more important demands made upon this department, I wish to call attention to our most pressing needs.

Nine hundred and sixty-nine patients under treatment during the year is a rapid turnover in an institution of the size and character of the Hospital School. Since the new hospital unit was established in 1922 to replace the old infirmary of 26 beds, the dormitory of 44 beds at the industrial building has been abandoned as being a fire hazard and no provision for ambulatory hospital patients thus far has been provided.

In fairness to the very sick patients and for the welfare of the children who are not quite strong enough to be discharged, there should be two cottages for convalescent girls and boys and at least one cottage should be built the coming year, if we are to carry to completion the original plan to provide prompt and appropriate treatment for the acute surgical and medical cases in the Child Guardianship Division of the Department of Public Welfare.

A building in fire-proof construction comparable to one of the thirty-bed cottages now occupied by school cases can be built at a cost of approximately \$50,000 and I earnestly recommend that this matter be given early consideration.

The east and west dormitories should be replaced by buildings of fire-proof construction as soon as the financial policy of the state will permit.

There can be no question as to the advisability of carrying on, in a small way, the work which is classified under

## THE FARM

Eighty-three thousand one hundred and fifty-seven quarts of milk have been produced at a cost of \$10,115.22, or 12 cents per quart. Even if commercial milk could be obtained at this price for delivery in specified quantity, there would still be an advantage in favor of the home product, which is

high above the maximum standard for butter fat, comes from a healthy source, is pasteurized and then consumed within 12 hours.

The poultry plant shows a profit of \$1,629.46, more than offsetting the loss of last year.

The most profitable method of disposing of food waste and garbage is by keeping swine which at certain seasons require no other food. They show a profit for the year of \$465.05.

Corn raised for ensilage, green feed for the cows and small garden crops suffered heavily from the long drought, but the demands made upon the farm labor of both men and teams for regular and emergency institution work brought the farm balance for the year to the profit side of the ledger to the sum of \$1,326.22.

Another strip of approximately 6 acres of scrub oak land was cleared this year along the Randolph Street boundary and there is reason to believe that adequate pasturage for the young stock will be available the coming season.

#### REPAIRS,

always an important item in the maintenance of property occupied by children, have been carried on by two carpenters and two painters and, aside from their routine work, time has been found for the following special work, which should be mentioned in the record for the year: A new poultry house was built on the site of the old portable houses. The new building is of more substantial construction on the original cement foundation with new floors of cement. The building is 172 feet long by 16 feet deep and is divided into 10 pens 16 feet square and a head house 12 by 18 feet. In common with our other buildings the new poultry house has an open ventilator running its entire length.

The east and west dormitory out-door school rooms were removed and new cement curbing placed where the pergola walk of brick was renewed by a surface of cement. In the west dormitory 2,277 square feet of No. 1 maple flooring were laid to replace floors laid twenty-two years ago. The serving room in the administration building was given a new floor of 6 x 9 red quarry tile, laid in cement, the foundation for which was prepared by our own workmen. All the interior walls of the Bradford Infirmary were given a new coat of paint in lead and oil and an enclosed veranda was built on the northwest corner of the second story of the nurses' home. Provision must be made for new shingles on the barn and a shed for carts and tools early in the new year.

#### GIFTS

Friends of the School have more than ever shown interest in our girls and boys and generosity in making them happy with gifts. Four full electric radio sets have been installed in different cottages. One was presented by the Majestic Radio Company, one was a gift from the Norwood Lodge of Elks, similar to the fine set given by them for the new schoolhouse last year, one was purchased from money donated by Mrs. Lyla Nims of Athol for the children at the school and another was the gift of the Trustees. The Rotary Club of Quincy sent a large number of sturdy sleds, carts and doll-carriages. *The Boston American* and the Fanny Farmer Candy Shops sent liberal supplies of candy. Many kind givers paid special attention to the patients at the Bradford Infirmary and to pupils without family connections to brighten their holidays. Among these contributors were the Business and Professional Women's Club of Auburndale and in addition a large supply of beautiful and appropriate gifts for the older pupils through the personal efforts of one member among her neighbors. The Wollaston Women's Club gave individual presents for a large list of girls and boys, making their gift more personal by the friendly visit of a delegation of the members. Pastors, churches, school clubs, and a number of other thoughtful donors made a happy holiday time for hundreds of our patients. Our kind friends in Canton, Sharon, Stoughton, Norwood and more remote towns and cities have our sincere gratitude for their liberality. We are indebted to the Hingham Community Band for one Sunday afternoon concert on the lawn and to



Revere Post, Veterans of Foreign Wars, for another open air concert by the United States Naval Band of Washington.

The duties and responsibilities of administration have been made lighter in numberless ways by my associates, very many of whom have rendered much voluntary assistance as an indication of their interest in the welfare of the children we have the honor to serve.

Respectfully submitted,

JOHN E. FISH, M.D., *Superintendent.*

### TERMS OF ADMISSION

Crippled and deformed children of the Commonwealth, between the ages of five and fifteen years, who are mentally competent to attend the public schools, are eligible for admission for hospital care and educational training.

Certain state minor wards who are not insane, feeble-minded, epileptic or otherwise unfit are admitted for hospital care only.

Payment for the board of private patients must be made in advance, unless sufficient surety therefor is given.

The institution is located on Randolph Street, in the town of Canton, about two miles from Canton and Canton Junction stations of the New York, New Haven & Hartford Railroad.

Automobile bus connects with two trains at Canton Junction station on Saturdays and Sundays.

Postoffice address: Canton, Massachusetts.

Applications for admission should be made to the superintendent.

### NATIVITY AND PARENTAGE OF CHILDREN ADMITTED

Birthplace	Patient	Father	Mother
Massachusetts . . . . .	561	150	201
Other New England States . . . . .	60	54	76
Other States . . . . .	17	27	35
Total Native . . . . .	638	231	312
Other countries:			
Albania . . . . .	—	1	—
Austria . . . . .	—	10	6
Azores . . . . .	—	7	8
Barbadoes . . . . .	—	1	—
Canada . . . . .	8	52	44
Cape Verde Islands . . . . .	—	1	1
Czecho-Slovakia . . . . .	—	1	3
England . . . . .	—	7	4
Finland . . . . .	—	3	4
France . . . . .	2	2	3
Germany . . . . .	—	3	3
Greece . . . . .	—	18	10
Ireland . . . . .	—	20	30
Italy . . . . .	3	71	49
Poland . . . . .	1	53	57
Portugal . . . . .	—	5	2
Prince Edward Island . . . . .	3	2	2
Russia . . . . .	—	17	22
Scotland . . . . .	—	1	—
Sicily . . . . .	—	—	3
Sweden . . . . .	—	5	4
Syria . . . . .	—	—	2
West Indies . . . . .	—	5	3
Total Foreign . . . . .	17	285	260
Unknown . . . . .	25	164	108
	680	680	680

## TREASURER'S REPORT

To the Trustees of the Massachusetts Hospital School:

I respectfully submit the following report of the finances of this institution for the fiscal year ending November 30, 1929:—

<i>Income</i>		<i>Receipts</i>	
Board of inmates . . . . .		\$77,061.50	
Personal services:			
Reimbursement from Board of Retirement . . . . .		71.25	
Sales . . . . .		541.01	
Interest on bank deposits . . . . .		154.96	
Rent . . . . .		120.25	
Refunds, account of previous years . . . . .		22.00	
			\$77,970.97
Receipts from Treasury of Commonwealth:			
Advance fund . . . . .		\$11,500.00	
Maintenance appropriation . . . . .		109,222.83	
			120,722.83
Total . . . . .			\$198,693.80
		<i>Payments</i>	
To Treasury of Commonwealth . . . . .			\$77,948.97
Maintenance appropriation . . . . .			109,222.83
Advance Fund . . . . .			11,500.00
Refunds, account of previous years . . . . .			22.00
Total . . . . .			\$198,693.80
		<i>Maintenance</i>	
Appropriation current year . . . . .			\$200,291.06
Expenses as analyzed below . . . . .			192,016.18
Balance reverting to Treasury of Commonwealth . . . . .			\$8,274.88

Total receipts and payments are in agreement with Comptroller's books of accounts.

<i>Analysis of Expenses</i>	
Personal services . . . . .	\$108,364.40
Food . . . . .	25,427.21
Medical and General Care . . . . .	8,775.64
Farm . . . . .	13,368.72
Heat, Light and Power . . . . .	12,951.58
Garage, Stable and Grounds . . . . .	1,799.98
Travel, Transportation and Office Expenses . . . . .	2,670.39
Religious Instruction . . . . .	1,540.00
Clothing and Material . . . . .	3,189.24
Furnishings and Household Supplies . . . . .	5,481.98
Repairs—ordinary . . . . .	4,476.09
Repairs and Renewals . . . . .	3,970.95
Total expenses for maintenance . . . . .	<u>\$192,016.18</u>
 SPECIAL APPROPRIATIONS	
Balance November 30, 1928 . . . . .	\$3,774.48
Expended during year . . . . .	914.34
	<u>\$2,860.14</u>
Reverting to State Treasury . . . . .	2,428.86
Balance November 30, 1929, carried to next year . . . . .	<u>\$431.28</u>
	<i>Chapter</i>
Purchase of Land . . . . .	225-1920
Schoolhouse . . . . .	138-1927
Reverting to State Treasury . . . . .	
	<i>Appropriation</i>
	\$15,000.00
	65,000.00
	<u>\$80,000.00</u>
	<i>Expenditures</i>
	\$14,568.72
	62,571.14
	<u>\$79,568.72</u>
	<i>Balance</i>
	\$431.28
	<u>\$431.28</u>

## PER CAPITA

During the year the average number of inmates has been 283.30  
 Total cost for maintenance, \$192,016.18  
 Equal to a weekly per capita cost of \$12.9983  
 Receipts from sales \$541.01  
 Equal to a weekly per capita cost of \$0.0316  
 All other institution receipts, \$77,407.96  
 Equal to a weekly per capita cost of \$5.239  
 Net weekly per capita cost, \$7.727

Respectfully submitted,

JOHN E. FISH, M.D., *Treasurer.*